

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | R H      |        | 715      |
| O.I.P.E. CLASSIFIER       | R        | 13     | 7/17/11  |
| FORMALITY REVIEW          | KG       | 702    | 08/17/10 |
| RESPONSE FORMALITY REVIEW |          |        |          |

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date   |
|----------|--------|
| Final    |        |
| Original | 4/9/03 |
| 1        | ✓      |
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| Claim    | Date |
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| Claim    | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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